## COMMONWEALTH OF MASSACHUSETTS

Middlesex, ss		Board of Registration in Medicine
		Adjudicatory No.
In the Matter of ) ROBERT B. DOWNES, M.D. Registration No. 32897 )		
RESIGNATION		
I, Robert B. Downes, M.D., being duly sworn, depose and state:		
1.	I desire to resign my license to practice medicine and/or my inchoate right to renew said license in the Commonwealth of Massachusetts pursuant to the terms of 243 CMR 1.05(5)(a).	
2.	My resignation is tendered	d voluntarily.
3.		on is a final act that deprives me of all privileges of registration sideration or judicial review.
4.	I will resign any other licenses contemporaneously with my resignation in Massachusetts, and I will make no attempt to seek licensure elsewhere.	
5.	I understand that my resignation is a disciplinary action that is reportable to any national data reporting agency, pursuant to G.L. c. 112, §2.	
Signed under the penalties of perjury this, day of, 2023.		
		Robert B. Downes, M.D.
Then personally appeared before me the above-named Robert B. Downes, M.D., who signed the foregoing resignation in my presence and acknowledged said resignation to be his free act and deed.		
Dated: Juve, 8, 2023 Notary Public, Nicla Nassif My Commission Expires: 03/14/2025		